

15458A



FORM 1-3

1-29

Practitioner's Docket No. _____

ADDED PAGE TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR SIGNING BY ADMINISTRATOR(TRIX), EXECUTOR(TRIX) OR LEGAL REPRESENTATIVE ON BEHALF OF DECEASED OR INCAPACITATED INVENTOR (37 CFR 1.42 AND 1.43)

I, Rose Näsman
 (type or print name(s) of administrator(trix), executor(trix), legal representative or all heirs)
 hereby declare that I am a citizen of FINLAND
 residing at Vasprågen 151
65300 Vasa, Finland

and that I am executing and signing the declaration to which this is attached as

(check one):

- ☐ the administrator(trix) of
☐ executor(trix) of the last will and testament of
☒ legal representative (or heirs) of

Jan Näsman

Full name of (first, second etc.) deceased or incapacitated inventor

Finnish citizen

Country of citizenship of deceased or incapacitated inventor

Dragonvägen 58 b A 6, FIN-20700 Åbo, Finland

Residence of deceased or incapacitated inventor

Post Office Address of deceased or incapacitated inventor

NOTE: The name of the first, second etc. deceased or incapacitated inventor should preferably also be filled in at the appropriate prior space of the declaration adding the words "deceased-completed on added page" or "incapacitated-completed on added page."

That, upon information and belief, I aver those facts that the inventor is required to state.

Date: 07.06.2002

Rose Näsman
 Signature of administrator(trix), executor(trix)
 legal representative (or all heirs)

NOTE: Proof of authority of the administrator(trix), executor(trix) or legal representative must be recorded in the PTO or filed in the application before the grant of the patent. 37 CFR 1.44.

NOTE: Application may be made by the heirs of the inventor if a certificate of the court will establish that they are all the heirs and the estate was not required to appoint an administrator. If the heirs are signing add lines for all the heirs to sign. MPEP § 409.01(a), 6th ed., rev. 3.

(Added Page to Combined Declaration and Power of Attorney for Signing by Administrator(trix), Executor(trix) or Legal Representative on Behalf of Deceased or Incapacitated Inventor (37 CFR 1.42 and 1.43) [1-3])



(Rev. 7-1-69) Pub. 605

FORM 1-3

1-31

NOTES TO FORM 1-3**ADDED PAGE TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR SIGNING BY ADMINISTRATOR(TRIX), EXECUTOR(TRIX) OR LEGAL REPRESENTATIVE ON BEHALF OF DECEASED INVENTOR**

1-3-1. "In case of the death of the inventor, the legal representative (executor, administrator, etc.) of the deceased inventor may make the necessary oath or declaration, and apply for and obtain the patent." 37 CFR 1.42.

1-3-2. "In case an inventor is insane or otherwise legally incapacitated, the legal representative (guardian, conservator, etc.) of such inventor may make the necessary oath or declaration, and apply for and obtain the patent." 37 CFR 1.43.

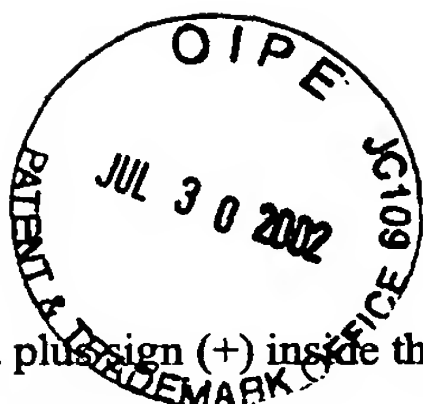
1-3-3. Proof of authority of an executor or administrator is usually made of record by filling in the application or recording in the assignment records a certificate of the clerk of a competent court or the register of wills that his appointment is still in full force and effect. Such certificate shall be signed by an officer and authenticated by the seal of the court by which the same was issued. The authority of other legal representatives of the inventor must be similarly established. If the certificate is not in the English language, an English translation is also required. MPEP § 409.01(b).

1-3-4. In the case of foreign executors or administrators, a consular officer of the United States may authenticate the signature of the foreign officer attesting to the papers submitted as proof of authority. MPEP § 409.01(b).

1-3-5. The terms "Executor" and "Administrator" do not find an exact counterpart in all foreign countries and the procedure is governed by the necessity of construing those terms to fit the circumstances of the case. Hence the person or person having authority corresponding to that of executor or administrator are permitted to make application as, for example, the heirs in Germany. The authority of such persons must be proved by an appropriate certificate. If the certificate is not in the English language, an English translation thereof is also required. MPEP § 409.01(d).

1-3-6. Application may be made by the heirs of the inventor if a certificate of the court is filed establishing that they are all the heirs and that the estate was one as not requiring under the law for the appointment of an administrator. If the court papers are not in English, then an unsworn English translation is required. MPEP § 409.01(a).

1-3-7. Where the legal representative of a deceased inventor cannot be found or reached after diligent effort or refuses to make application then the person with a proprietary interest can apply. In such case, the last known address of the legal representative must be given and proof of authority of the legal representative must be established before the grant of the patent. MPEP § 409.03(c).



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Type a plus sign (+) inside this box [+]

Approved for use through 9/30/00

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

PTO/SB/01 (8/96) DECLARATION Declaration OR Declaration <input type="checkbox"/> Submitted with <input checked="" type="checkbox"/> Submitted after Initial Filing Initial Filing	Attorney Docket Number	2534-00066	
	First Named Inventor	Auer, Markku	
	COMPLETE IF KNOWN		
	Application Number	10/031,739	
	Filing Date		
	Group Art Unit		
Examiner Name			

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

A COMONOMER, AND A POLYMER STABILIZED WITH IT DURING POLYMERIZATION

(Title of the Invention)

the specification of which
☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 06/28/2000 as United States Application Number or PCT

International Number PCT/FI00/00585 and was amended on (MM/DD/YY) 08/15/2001
(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT international application which designed at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Copy Attached?	
				YES	NO
991634	Finland	07/21/1999	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional <input type="checkbox"/> Application numbers are listed on a supplemental priority sheet attached hereto.

Type a plus sign (+) inside this box [+]

DECLARATION							
I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365© of any PCT international application designated the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States of PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.							
U.S. Parent Application Number		PCT Parent Number		Parent Filing Date (MM/DD/YYYY)		Parent Patent Number (if applicable)	
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.							
As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:							
Name		Registration Number		Name		Registration Number	
Glenn O. Starke		17,031		Edward R. Williams, Jr.		36,057	
Eugene R. Sawall		17,431		Joseph D. Kuborn		40,689	
Daniel D. Fetterley		20,323		William L. Falk		27,709	
George H. Solveson		25,927					
Gary A. Essmann		29,376					
Thomas M. Wozny		28,922					
Michael E. Taken		28,120					
Joseph J. Jochman, Jr.		25,058					
Andrew S. McConnell		32,272					
<input type="checkbox"/> Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.							
<input checked="" type="checkbox"/> Please direct all correspondence to: Name Daniel D. Fetterley							
Address Andrus, Sceales, Starke & Sawall, LLP							
Address 100 East Wisconsin Avenue, Suite 1100							
City Milwaukee		State Wisconsin		Zip 53202-4178			
Country United States		Telephone (414) 271-7590		Fax (414) 271-5770			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
Name of Sole or First Inventor: <input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname			
Markku				Auer			
Inventor's Signature				Date			
RESIDENCE: City Espoo		State		Country FI		Citizenship FI	
POST OFFICE ADDRESS VTT Kemianteekniikka, Biologinkuja 7, FIN-02150 Espoo							
City Espoo		State		Zip FIN-02150		Country Finland	
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto.							

Please type a plus sign (+) inside this box [+]

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
--------------------	---

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Carl-Erik				Wilen			
Inventor's Signature				Date			
RESIDENCE: City	Åbo	State		Country	FI	Citizenship	FI
POST OFFICE ADDRESS		Åbo Akademi, Teknisk Polymerkemi, Biskopsgatan					
City	Åbo	State		Zip	FIN-20500	Country	Finland

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Juha				Stranden			
Inventor's Signature				Date			
RESIDENCE: City	Åbo	State		Country	FI	Citizenship	FI
POST OFFICE ADDRESS		Åbo Akademi, Teknisk Polymerkemi, Biskopsgatan					
City	Åbo	State		Zip	FIN-20500	Country	Finland

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Ari				Rosling			
Inventor's Signature				Date			
RESIDENCE: City	Åbo	State		Country	FI	Citizenship	FI
POST OFFICE ADDRESS		Åbo Akademi, Teknisk Polymerkemi, Biskopsgatan					
City	Åbo	State		Zip	FIN-20500	Country	Finland

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Jan				Näsman			
Inventor's Signature		Rosa Näsman		Date 7/6 2002			
RESIDENCE: City	Åbo	State	FI	Country	FI	Citizenship	FI
POST OFFICE ADDRESS		Dragonvägen 58 b A 6					
City	Åbo	State		Zip	FIN-20700	Country	Finland

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Hendrik				Luttikhedde			
Inventor's Signature				Date			
RESIDENCE: City	Turku	State		Country	FI	Citizenship	NL
POST OFFICE ADDRESS		Sirkkalankatu 27 A 28					
City	Turku	State		Zip	FIN-20700	Country	Finland



1003 1739 15458A

Type a plus sign (+) inside this box [+]

Approved for use through 9/30/00
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

PTO/SB/01 (8/96) DECLARATION Declaration OR Declaration <input type="checkbox"/> Submitted with <input checked="" type="checkbox"/> Submitted after Initial Filing Initial Filing	Attorney Docket Number	2534-00066
	First Named Inventor	Auer, Markku
	COMPLETE IF KNOWN	
	Application Number	10/031,739
	Filing Date	
	Group Art Unit	
	Examiner Name	

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(Title of the Invention)

the specification of which
☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 06/28/2000 as United States Application Number or PCT

International Number PCT/FI00/00585 and was amended on (MM/DD/YY) 08/15/2001
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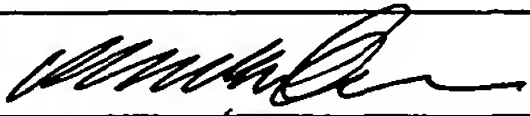
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Copy Attached?	
				YES	NO
991634	Finland	07/21/1999	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)		
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.					
As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:					
Name	Registration Number	Name	Registration Number		
Glenn O. Starke	<u>17,031</u>	Edward R. Williams, Jr.	<u>36,057</u>		
Eugene R. Sawall	<u>17,431</u>	Joseph D. Kuborn	<u>40,689</u>		
Daniel D. Fetterley	<u>20,323</u>	William L. Falk	<u>27,709</u>		
George H. Solveson	<u>25,927</u>				
Gary A. Essmann	<u>29,376</u>				
Thomas M. Wozny	<u>28,922</u>				
Michael E. Taken	<u>28,120</u>				
Joseph J. Jochman, Jr.	<u>25,058</u>				
Andrew S. McConnell	<u>32,272</u>				
<input type="checkbox"/> Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.					
<input checked="" type="checkbox"/> Please direct all correspondence to: Name <u>Daniel D. Fetterley</u>					
Address <u>Andrus, Sceales, Starke & Sawall, LLP</u>					
Address <u>100 East Wisconsin Avenue, Suite 1100</u>					
City	<u>Milwaukee</u>	State	<u>Wisconsin</u>	Zip	<u>53202-4178</u>
Country	<u>United States</u>	Telephone	<u>(414) 271-7590</u>	Fax	<u>(414) 271-5770</u>
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
Name of Sole or First Inventor: <input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])			Family Name or Surname		
<u>Markku</u>			<u>Auer</u>		
Inventor's Signature				Date	<u>Jan 14, 2002</u>
RESIDENCE: City	<u>Espoo</u>	State	<u>FI</u>	Country	<u>FI</u>
POST OFFICE ADDRESS <u>VTT Kemianteekniikka, Biologinkuja 7, FIN-02150 Espoo</u>					
City	<u>Espoo</u>	State	<u>FI</u>	Zip	<u>FIN-02150</u>
Country		<u>Finland</u>			
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto.					

Please type a plus sign (+) inside this box [+]

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
--------------------	---

200

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Carl-Erik				Wilen			
Inventor's Signature				Date		24 Jan 2002	
RESIDENCE: City		Åbo		State		Country	
		FI				Citizenship	
						FI	
POST OFFICE ADDRESS				Åbo Akademi, Teknisk Polymerkemi, Biskopsgatan			
City		Åbo		State		Zip	
						FIN-20500	
				Country		Finland	

300

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Juha				Stranden			
Inventor's Signature				Date		7 May 2002	
RESIDENCE: City		Åbo		State		Country	
		FI				Citizenship	
						FI	
POST OFFICE ADDRESS				Åbo Akademi, Teknisk Polymerkemi, Biskopsgatan			
City		Åbo		State		Zip	
						FIN-20500	
				Country		Finland	

400

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Ari				Rösling			
Inventor's Signature				Date		29 Jan 2002	
RESIDENCE: City		Åbo		State		Country	
		FI				Citizenship	
						FI	
POST OFFICE ADDRESS				Åbo Akademi, Teknisk Polymerkemi, Biskopsgatan			
City		Åbo		State		Zip	
						FIN-20500	
				Country		Finland	

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Jan				Näsman			
Inventor's Signature				Date			
RESIDENCE: City		Åbo		State		Country	
						FI	
						Citizenship	
						FI	
POST OFFICE ADDRESS				Dragonvägen 58 b A 6			
City		Åbo		State		Zip	
						FIN-20700	
				Country		Finland	

600

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Hendrik				Luttikhedde			
Inventor's Signature				Date		6 Feb 2002	
RESIDENCE: City		Turku		State		Country	
		FI				Citizenship	
						NL	
POST OFFICE ADDRESS				Sirkkalankatu 27 A 28			
City		Turku		State		Zip	
						FIN-20700	
				Country		Finland	